

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MS</i>		11-19-01
O.I.P.E. CLASSIFIER		47	11-1-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>E-H</i>	713	11-16-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	2/24/02
2	4/9/02
3	10/18/01
4	2/24/02
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32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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